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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration  
Submitted  
with Initial  
Filing

OR

☒ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

|                        |                       |
|------------------------|-----------------------|
| Attorney Docket Number | P02138US0             |
| First Named Inventor   | Per Andersson, et al. |
| COMPLETE IF KNOWN      |                       |
| Application Number     | 09/812,123            |
| Filing Date            | March 19, 2001        |
| Group Art Unit         | 1743                  |
| Examiner Name          | Not Yet Assigned      |

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A MICROFLUIDIC SYSTEM (EDI)

(Title of the invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 03/19/2001 as United States Application Number or PCT International Application No. [ ] and was amended on (MM/DD/YYYY) [ ] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign<br>Application<br>Number(s) | Country | Foreign Filing Date<br>(MM/DD/YYYY) | Priority<br>Not Claimed  | Certified Copy Attached? |                          |
|---|---------|-------------------------------------|--------------------------|--------------------------|--------------------------|
|   |         |                                     |                          | YES                      | NO                       |
|   |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|   |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|   |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|   |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below

| Application Number(s) | Filing Date (MM/DD/YYYY) |
|-----------------------|--------------------------|
|                       |                          |

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

I hereby certify that this correspondence is being deposited with the U.S. Postal Service in a special envelope addressed to: Commissioner for Patents, Washington, DC 20231, on the date shown below

Dated 6-26-01 Signature Staci V. Harris (Staci V. Harris)

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# DECLARATION — Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the

**NAME OF SOLE OR FIRST INVENTOR:**

☐ A petition has been filed for this unsigned inventor

**Given Name**  
(first and middle [if any])

**Per**

**Family Name**  
or Surname

Andersson

**Inventor's**  
**Signature**

**Date**

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**State**

**Country** Sweden

**Citizenship**

**Mailing**  
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**City** Uppsala **State** SE 753 29 **ZIP** Sweden **Country**

**NAME OF SECOND INVENTOR:**

☐ A petition has been filed for this unsigned inventor

**Given Name**  
(first and middle [if any])

Helene

**Family Name**  
or Surname

Derand

**Inventor's**  
**Signature**

**Date**

**Residence:** City Taby

**State**

**Country** Sweden

**Citizenship**

**Mailing**  
**Address:** Enstavagen 33

**City** Taby **State** SE 187 35 **ZIP** Sweden **Country**



Additional inventors are being named on the

1

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

|                    |   |
|--------------------|---|
| <b>DECLARATION</b> | <b>ADDITIONAL INVENTOR(S)</b><br><b>Supplemental Sheet</b><br>Page 1 of 1 |
|--------------------|---|

|  |       |   |                |
|--|-------|---|----------------|
| Name of Additional Joint Inventor, if any:     |       | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                |
| Given Name (first and middle (if any)) Magnus  |       | Family Name or Surname Gustafsson   |                |
| Inventor's Signature <i>Magnus</i>             |       | Date 061801   |                |
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| Mailing Address: Tornbacken 10                 |       |   |                |
| City Solna                                     | State | ZIP SE 170 67   | Country Sweden |
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| Given Name (first and middle (if any)) Anders  |       | Family Name or Surname Palm   |                |
| Inventor's Signature <i>Anders</i>             |       | Date  |                |
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| City Uppsala                                   | State | ZIP SE 756 95   | Country Sweden |
| Name of Additional Joint Inventor, if any:     |       | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                |
| Given Name (first and middle (if any)) Susanne |       | Family Name or Surname Wallenborg   |                |
| Inventor's Signature <i>Susanne</i>            |       | Date 061801   |                |
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| City Uppsala                                   | State | ZIP SE 756 45   | Country Sweden |
| Name of Additional Joint Inventor, if any:     |       | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                |
| Given Name (first and middle (if any))         |       | Family Name or Surname  |                |
| Inventor's Signature                           |       | Date  |                |
| Residence: City                                | State | Country   | Citizenship    |
| Mailing  |       |   |                |

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PTO/SB/81 (02-01)

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**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

|                      |                            |
|----------------------|----------------------------|
| Application Number   | 09/812,123                 |
| Filing Date          | March 19, 2001             |
| First Named Inventor | Per Andersson              |
| Title                | A MICROFLUIDIC SYSTEM (ED) |
| Group Art Unit       | N/A                        |
| Examiner Name        | Not Yet Assigned           |
| Attorney Docket No.  | HO-P02138US0               |

I hereby appoint:

☒ Practitioners at Customer Number 26,271

Customer Number

OR

☐ Practitioner(s) named below:

| Name | Registration Number | Name | Registration Number |
|------|---------------------|------|---------------------|
|      |                     |      |                     |

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I am the

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE OF Applicant or Assignee of Record**

Assignee

Gyros, A B

Name

**Håkan Bergander**

Total of

1

forms are submitted